



Health in relation to special educational needs

What are Health services and what do they need to provide

Health services for children and young people with SEN or disabilities include those provided by paediatricians, psychiatrists, psychologists, nurses and other health professionals such as occupational therapists, speech and language therapists and physiotherapists.

Clinical Commissioning Groups (CCGs) have a duty under Section 3 of the NHS Act 2006 to arrange health care provision for the people for whom they are responsible to meet their “reasonable” health needs. These services should be described on the [local offer](#). Under the Children and Families Act 2014, CCGs and other health bodies are required to co-operate with the local authority in jointly commissioning services, ensuring there is sufficient capacity contracted to deliver necessary services, drawing the attention of the local authority to groups and individual children and young people with SEN or disabilities, supporting diagnosis and assessment, and delivering interventions and review.

Health care provision and Education, Health and Care Plans

Section 42 of the Children and Families Act 2014 creates a legal duty on the CCG to ensure that health care provision specified in a child or young person’s EHC plan is made available to them. The joint arrangements underpinning the plan will include agreement between the partners about their respective responsibilities for funding the arrangements, to ensure that the services specified are commissioned.

Assessments of healthcare needs for Education, Health and Care Plans

The EHC plan must specify any health needs identified through the EHC needs assessment which relate to the child or young person’s SEN in section C. Some health care needs, such as routine dental health needs, are unlikely to be related to SEN. The CCG may also choose to specify other health care needs which are not related to the child or young person’s SEN (for example, a long-term condition which might need management in a special educational setting). Relevant local clinicians, such as community paediatricians, will participate in the development of the child’s or young person’s EHC plan, advising on the child’s needs and the provision appropriate to meet them.

The health care provision specified in section G of the EHC plan must be agreed by the CCG in time to be included in the draft EHC plan sent to the child’s parent or to the young person.



Continuing Care

In addition, the National Framework for Children and Young People's Continuing Care sets out the requirements for assessing children with health needs and eligibility for continuing healthcare. The Framework states that: 'A continuing care package will be required when a child or young person has needs arising from disability, accident or illness that cannot be met by existing universal or specialist services alone.' During the assessment phase of the continuing care process, the following should be considered:

- the preferences of the child or young person and their family;
- a holistic assessment of the needs of the child or young person and their family;
- reports and risk assessments from a multidisciplinary team or evidence collated during the Education, Health and Care plan assessment; and;
- the Decision Support Tool for children and young people

The decision-making phase usually involves a multi-agency forum or panel in which the forum or panel will make a decision as to whether or not the child or young person has a continuing care need. The costed options should be considered after the decision has been made.

Under the National Health Service Commissioning Board and Clinical Commissioning Groups (Responsibilities and Standing Rules) (Amendment) Regulations 2013, the families of a child or young person eligible for continuing care have a 'right to have' a personal health budget, covering the part of their care package which would be provided by the NHS.

Transition to adult health services

The Code of Practice at paragraph 8.56 states that support to prepare young people for good health in adulthood should include supporting them to make the transition to adult health services. A child with significant health needs is usually under the care of a paediatrician. As an adult, they might be under the care of different consultants and teams. Health service and other professionals should work with the young person and, where appropriate, their family. They should gain a good understanding of the young person's individual needs, including their learning difficulties or disabilities, to co-ordinate health care around those needs and to ensure continuity and the best outcomes for the young person. This means working with the young person to develop a transition plan, which identifies who will take the lead in co-ordinating care and referrals to other services. The young person should know who is taking the lead and how to contact them. For young people with EHC plans, the plan should be the basis for co-ordinating the integration of health with other services.



Where young people are moving to adult health services, the local authority and health services must co-operate, working in partnership with each other and the young person to ensure that the EHC plan and the care plan for the treatment and management of the young person's health are aligned. The CCG must co-operate with the local authority in supporting the transition to adult services and must jointly commission services that will help meet the outcomes in the EHC plan.

The Role of the Designated Medical / Clinical Officer

The Code of Practice at paragraph 3.45 states that a Designated Medical Officer (DMO) should be appointed to support the CCG in meeting its statutory responsibilities for children and young people with SEN and disabilities. The role of the DMO is to:

- act as a point of contact for local authorities, schools and colleges when notifying parents and local authorities about children and young people they believe have, or may have, SEN or a disability, and when seeking advice on SEN or disabilities;
- act as point of contact for local authorities, schools and colleges seeking health advice
- support schools with their duties under Supporting Pupils at School with Medical Conditions guidance
- ensure that assessments, planning and health support is carried out within CCGs. The DMO would not routinely carry out the assessments themselves but ensure they are done.

The person in this role should have an appropriate level of clinical expertise and links with other professionals to enable them to exercise their duties in relation to children and young adults with EHC plans from the age of 0 to 25 in a wide range of educational institutions. This role would usually be carried out by a paediatrician though there is local flexibility for the role to be carried out by a relevantly qualified and experienced nurse or other health professional (in which case the role would be the Designated Clinical Officer).

Redress/tribunal powers

The SEND tribunal are now able to make non-binding recommendations in relation to health and social care.



The following link provides further details: [Guidance overview: SEND tribunal: extended appeals - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/special-educational-needs-tribunal-extended-appeals). The Regulations explain that the Tribunal can now make non-binding recommendations on:

- the health and social care needs specified in EHC plans
- the health and social care provision specified in EHC plans related to the learning difficulties or disabilities that result in the child or young person having SEN

However, you must also have an education issue to appeal as well, you can't just appeal about health (or social care). Although any recommendations made by the Tribunal on health and social care elements of an EHC plan are non-binding and there is no requirement to follow them, they should not be ignored or rejected without careful consideration. Any reasons for not following them must be explained and set out in writing to the parent or young person. It is important to be aware that, should an LA or responsible health commissioning body decide not to follow the recommendations of the Tribunal, parents and young people can complain to the Ombudsmen or seek to have the decision judicially reviewed. The Parliamentary and Health Service Ombudsman can't investigate any issues where you can get an answer to your complaint by taking legal action.

For further information and guidance, please contact us on the above number or email address.